

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 936 / 1408

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DR. XIULU RUAN

Mailing Address 2001 SPRING HILL AVE

City

MOBILE

State

AL

Zip Code

36607-3326

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼
Occupation
PHYSICIAN

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	8	/	2	0	0	9

Transaction ID: SA11.13071508

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. TODD RUBLEY

Mailing Address 517 AARON AVE

City

JACKSON

State

OH

Zip Code

45640-9439

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼
Occupation
PHYSICIAN

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	5	/	2	0	0	9

Transaction ID: SA11.13052260

Amount of Each Receipt this Period

300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. GERALDINE RUDD

Mailing Address 681 EAGLE VIEW CIR

City

TALLAHASSEE

State

FL

Zip Code

32311-1208

FEC ID number of contributing
federal political committee.

C

Name of Employer
FABULOUS FROM FLORIDA INC.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼
Occupation
RETIRED

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	7	/	2	0	0	9

Transaction ID: SA11.13070372

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

910.00

TOTAL This Period (last page this line number only)